PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | | 10/ 554065 | | | |
|-------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------|-----------------|-------------------------------|---------------------------------------|------------------|---------------------|------------------------|------------|-------------------------|------------------------|--|
| | | CLAIMS | | - PART (| | Column 2) | SMALL EN | | OR | OTHER | THAN | |
| U.S. NATIONAL STAGE FEES | | | | | | | RATE | FEE | | RATE | FEE | |
| BASIC FEE | | | | | ! | | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | | | | | EXAM. FEE | | | EXAM. FEE | 200 | |
| SEARCH FEE | | | | | | | SEARCH FEE | | | SEARCH FEE | 407 | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | X \$ 125 = | | | X \$ 250 = | / | |
| TOTAL CHARGEABLE CLAIMS | | | 20 minus 20 = * | | * | / | X \$ 25 = | | OR | X \$ 50 = | | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = * | | * | | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | · · · · · · · · · · · · · · · · · · · | | + \$ 180 = | | OR | + \$ 360 = | | |
| * If | the difference | e in column 1 is | less than zo | ero, enter "(|)" in co | lumn 2 | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 2) (Column 2) | | | | | | (Column 3) | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | steste. | | = | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | | |
| | | (Column 1) | | (Colu | | (Column 3) | | | | | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| AMENDME | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | TOT | | | | | | | | OR | TOTAL ADDIT. | | |